PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSULE EE Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correcte maintenance fee notifical	ed below or directed oth	ng the Patent, advance of nerwise in Block 1, by (a	a) specifying a new corres	pondence address;	and/or	(b) indicating a separ	rate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
BUCHANAN, INGERSOLL & ROONEY PC POST OFFICE BOX 1404 ALEXANDRIA, VA 22313-1404				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
							(Depositor's name)	
							(Signature)	
							(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.		CONFIRMATION NO.		
10/553,673 01/26/2007			Peter Frisk	1034185-000074		1530		
FITLE OF INVENTION	: PROCESS FOR PROD	OUCING PACKAGING I	AMINATE MATERIAL					
							A.	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0		\$1810	03/16/2010	
EXAM	INER	ART UNIT	CLASS-SUBCLASS	•			- 11	
CHAN, SING P		1791	156-277000			ĮŤ.		
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			(1) the names of up to or agents OR, alternativ (2) the name of a single registered attorney or a 2 registered patent attor	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) TETRA LAVAL HOLDINGS & FINANCE S.A. Pully, SWITZERLAND Please check the appropriate assignee category or categories (will not be printed on the patent):								
4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.							hown above)	
6. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). WOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in								
NOTE: The Issue Fee and nterest as shown by the r	Publication Fee (if requeecords of the United Sta	rired) will not be accepted tes Patent and Trademark	trom anyone other than the Office.	ie applicant; a regis	tered att	orney or agent; or the	assignee or other party in	
Authorized Signature March 16, 2010								
Typed or printed name		Registration No. 32,814						
This collection of information application. Confident ubmitting the completed	ntion is required by 37 C iality is governed by 35 application form to the	FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary	on is required to obtain or re 1.14. This collection is esti depending upon the indivi	etain a benefit by th mated to take 12 m dual case. Any cor	e public inutes to nments	which is to file (and o complete, including on the amount of tim	by the USPTO to process) gathering, preparing, and e you require to complete	

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.